



# AREA VARIANCE APPLICATION CHECKLIST

## TOWN OF ULYSSES PLANNING DEPARTMENT

**INSTRUCTIONS:** Submit the following items listed in the checklist below. Electronic submittal via email is preferred. Hard copies may be submitted by mail or in person; however, digital files of all hard copies will be required to be submitted.

<b>1. Fee</b>	The application fee is \$165.00; Checks payable to “Town of Ulysses”. All additional amounts owed for engineering or legal shall be paid by the applicant to the Town of Ulysses.
<b>2. Area Variance Survey Map</b>	A map showing all setbacks of the existing and proposed structures for all area variances, in accordance with the Area Variance Survey Map Checklist.
<b>3. Site Photographs of the Proposed Project</b>	A narrative that explains what is being proposed, why the approval should be considered, hardships involved, and why this change will not be detrimental to the neighborhood and the Town.
<b>4. Proof of Ownership</b>	A copy of the DEED.
<b>5. Agricultural Data Statement</b>	Required for Area Variance application: a. When subject property is located within an agricultural district which contains a farm operation. <b>OR</b> b. When subject property features boundaries within five hundred feet of a farm operation located in an agricultural district.
<b>6. Letter of Authorization</b>	A letter from the property owner to the representative granting them permission to act on the property owner’s behalf. The property owner must sign the application.
<b>7. Environmental Assessment Form</b>	Complete the Environmental Assessment Form.
<b>8. Original Material and Copies</b>	Total of eight (8) copies.
<b>9. One Electronic Copy</b>	Electronic copy in PDF format.

**If this checklist or any of the items above are not included with your application submittal, your application may be deemed “incomplete” and returned to you.**



10 Elm Street  
Trumansburg, NY 14886



607.387.5767



planner@townofulyssesny.gov  
www.ulysses.ny.us

UPDATED 2023



## AREA VARIANCE APPLICATION

### TOWN OF ULYSSES PLANNING DEPARTMENT

**INSTRUCTIONS:** Complete form, sign, and date.

See applicable application packet for all required checklist items.

CONTACT INFORMATION					
APPLICANT					
ADDRESS					
CITY		STATE		ZIP	
PHONE		EMAIL			
OWNER					
ADDRESS					
CITY		STATE		ZIP	
PHONE		EMAIL			
PRIMARY	<input type="checkbox"/> APPLICANT <input type="checkbox"/> OWNER <input type="checkbox"/> OTHER, PLEASE SPECIFY BELOW				
NAME					
PHONE		EMAIL			

PROJECT SITE INFORMATION	
ADDRESS	
PARCEL NO(S)	
PROJECT INFORMATION	
PROJECT NAME	
PROJECT DESCRIPTION	
VALUATION	

**Authorization:** I am the owner or am authorized by the owner to sign and submit this application. I certify under penalty of perjury of the laws of the State of New York that the information on this application and all information submitted herewith is true, complete, and correct.

SIGNATURE		DATE	
PRINT NAME			
CITY, STATE			



10 Elm Street  
Trumansburg, NY 14886



607.387.5767



planner@townofulyssesny.gov  
www.ulysses.ny.us

UPDATED 2023